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TO: DIVISION OF CORPORATIONS — FAX #: (904)922-4001

FROM: EMPIRE CORPORATE KIT COMPANY — ACCT#: 072450003255
CONTACT: RAY STORMONT
PHONE: (305)541-3694 — FAX #: (305)541-3770

NAME: DENTAL MED SUPPLY, INC.
AUDIT NUMBER......H96000013452
DOC TYPE..........FLORIDA PROFIT CORPORATION OR P.A.
CERT. OF STATUS..0 — PAGES....... 3
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TALLAHASSEE, FLORIDA

ARTICLES OF INCORPORATION FOR

DENTAL MED SUPPLY, INC.

NAME

The name of the corporation is: DENTAL MED SUPPLY, INC.

PRINCIPAL OFFICE

The principal office of the corporation is:

1801 N. PINE ISLAND RD., #103A
PLANTATION, FL 33322

NUMBER OF SHARES

The number of shares the corporation is authorized to issue is 100 shares with a par value of $1.00 each.

INITIAL BOARD OF DIRECTORS

The incorporator shall hold an organizational meeting at the call of a majority of the incorporators to elect directors and complete the organization of the corporation, or may take such action without a meeting in writing as provided by law.

PREEMPTIVE RIGHTS

The Shareholders shall have the preemptive right to purchase unissued shares of the corporation.

INCORPORATOR

The name and address of each incorporator is:

Barry D. Kowitt, Esq.
1801 N. Pine Island Rd., #101
Plantation, FL 33322

BARRY D. KOWITT
1801 N Pine Island Rd, #101
Plantation, FL
33322
954-370-7999
FL BAR NO 987417

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SEP-25-1996 14:00 EMPIRE CORPORATE KIT P.10/24

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REGISTERED OFFICE AND AGENT

The street address of the corporation's initial registered office and the name of its initial registered agent at that office is as follows:

Jorge Parreno
1801 N. Pine Island Rd., # 103A
Plantation, FL 33322

ACCEPTANCE

The undersigned does hereby accept his appointment as registered agent as set forth above.

IN WITNESS WHEREOF the undersigned incorporator has hereunto set his hand and seal on this 25 day of September, 1996.

STATE OF FLORIDA)
) SS
COUNTY OF BROWARD)

I HEREBY CERTIFY that on this day, before me, an officer duly authorized in the State aforesaid and in the County aforesaid to take acknowledgments, personally appeared Jorge Parreno to me know to be the person described in and who executed the foregoing instrument and he acknowledged before me that he executed the same.

WITNESS my hand and official seal in the County and State last aforesaid this 25 day of September, 1996.

Notary Public

My Commission Expires:

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